

DATE MAILED:

UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office
Address: COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

FIRST NAMED APPLICANT ATTORNEY DOCKET NO./TITLE FILING/RECEIPT DATE APPLICATION NUMBER 101723 09/212,714 12/16/98 0262/010% OLIFF AND BERRIDGE NOT ASSIGNED F 0 BOX 19928 ALEXANDRIA VØ 22320

01/08/99

NOTICE TO FILE MISSING PARTS OF APPLICATION Filing Date Granted

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given TWO MONTHS FROM THE DATE OF THIS NOTICE within which to file all required items and pay fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a). If any of items 1 or 3 through 5 are indicated as missing, the SURCHARGE set forth in 37 CFR 1.16(e) of \$65.00 for a small

to avoid abandonment. If all required items on to small entity (statement)	this form are filed with the filed in the filed) to hon-small	thin the period set above entity is \$, the total amount owe	d by applicant as a	.
☐ 1. The statutory basic ☐ missing. ☐ insufficient. ☐ Applicant must subsuch status (37 CF)	c filing fee is:		sic filing fee and/or file a	small entity stateme	ent claiming
☐ 2. Additional claim fe		, including any mult	iple dependent claim fee	es, are required.	
\$	for	_ independent claims over	er 3.	•	
\$	for	_ dependent claims over	20.		
☐ 3. The oath or decla is missing or u ☐ does not cover	ration:	nal claim fees or cancel acted	dditional claims for which	n fees are due.	
☐ does not inclue An oath or declara the above Applica	de the city and state or ttion in compliance with tion Number and Filing	r foreign country of applica h 37 CFR 1. 63, including i g Date is required.	residence information an		. . .
1.43 or 1.47. A properly signed	•	on is/are by a person other compliance with 37 CFR 1 equired.			;FR 1.42,
☐ 5. The signature of the	e following joint invent	or(s) is missing from the or	ath or declaration:		·
inventor(s), identification 6: A \$50.00 processing 7. Your filing receipt we application does	ving this application by ignee is required since was mailed in error bec es not comply with the	ause your check was retu	mber and Filing Date, is without payment (37 CF med without payment.	required.	ted
Direct the reply and any	questions about this no	otice to "Attention: Box Mis	sing Parts."	The second secon	4.
A complete this notice MIICT he returned with the rest.					

Customer Service Center